



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

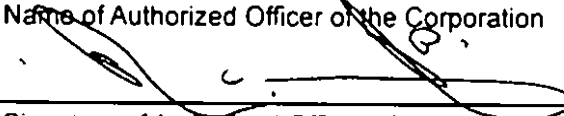
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 R.I. DEPT. OF STATE
 BUS SVCS DIV
 2019 OCT 24 P 1:59

Statement of Change of Agent

DOMESTIC or FOREIGN Business Corporation

→ Filing Fee: \$20.00

Pursuant to the provisions of RIGL 7-1.2-502 or 7-1.2-1409 the undersigned corporation submits the following statement for the purpose of changing its registered agent in the State of Rhode Island:

1. Entity ID Number 78608		2. Exact Name of the Corporation RAICOR INC.	
3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State:			
Street Address 116 Chestnut St			
City/Town PROVIDENCE		State RHODE ISLAND	Zip 02903
4. The name of the registered agent as PRESENTLY shown in the records on file with the RI Department of State: ROBERT WATT JR.			
5. The address of the NEW registered office is:			
Street Address (NOT a P.O. Box) 420 ADELAIDE AVE			
City/Town PROVIDENCE		State RHODE ISLAND	Zip 02907
6. The name of the NEW registered agent is: RICARDO PATINO			
7. Date when this Statement of Change of Registered Agent will be effective: CHECK ONE BOX ONLY			
<input checked="" type="checkbox"/> Date received (Upon filing)			
<input type="checkbox"/> Later effective date (Date must be no more than 30 days from the date of filing) _____			
Under penalty of perjury, I declare and affirm that I have examined this Statement of Change of Registered Agent by the Corporation, and that all statements contained herein are true and correct.			
Name of Authorized Officer of the Corporation 			Date 10/4/19
Signature of Authorized Officer of the Corporation SIGN DOCUMENT HERE			

MAIL TO:

Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040
 Website: www.sos.ri.gov

FILED
OCT 04 2019
 BY **CAJBQE7**